

1/11 3763

Please Direct All Correspondence to Customer Number 20995

AMENDMENT / RESPONSE TRANSMITTAL

Applicant : Steven F. Bierman
 App. No : 09/767,207
 Filed : January 22, 2001
 For : MEDICAL DEVICE CONNECTOR
 FITTING
 Examiner : Kevin C. Sirmons
 Art Unit : 3763

CERTIFICATE OF MAILING

I hereby certify that this correspondence and all marked attachments are being deposited with the United States Postal Service as first-class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on

April 18, 2006

(Date)

James F. Herkenhoff
 James F. Herkenhoff, Reg. No. 51,241

Mail Stop Amendment

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Sir:

Transmitted herewith for filing in the above-identified application are the following enclosures:

(X) Amendment in 11 pages.

The fee has been calculated as shown below:

The present application qualifies for Small Entity Status under 37 CFR 1.27.

FEE CALCULATION				
FEE TYPE		FEE CODE	CALCULATION	TOTAL
Excess Claims	21 - 37 = 0	2202 (\$25)	0 x 25 =	\$0
Excess Independent	9 - 10 = 0	2201 (\$100)	0 x 100 =	\$0
Multiple Claim	1.16(j)	2203 (\$180)		\$0
1 Month Extension	1.17(a)(1)	2251 (\$60)		\$0
2 Month Extension	1.17(a)(2)	2252 (\$225)		\$225
3 Month Extension	1.17(a)(3)	2253 (\$510)		\$
TOTAL FEE DUE				\$225

(X) An extension of time is hereby requested by payment of the appropriate fee indicated above.

(X) A check in the amount of \$225 is enclosed.

(X) Return prepaid postcard.

04/21/2006 YPOLITE1 00000051 09767207

01 FC:2252

225.00 0P

Docket No.: VINTL.087A

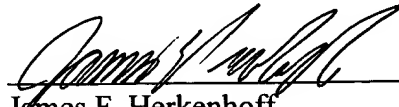
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- (X) Please charge any additional fees, including any fees for additional extension of time, or credit overpayment to Deposit Account No. 11-1410.



James F. Herkenhoff

Registration No. 51,241

Attorney of Record

Customer No. 20,995

(619) 235-8550

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